

Michigan
Department
of Human
Services

Prepared by the
DHS Office of
Communications
(517) 373-7394

Articles in Today's Clips

Wednesday, May 28, 2008

(Be sure to maximize your screen to read your clips)

TOPIC	PAGE
Child Abuse/Neglect	2-5
Children's Issues	6-9
Seniors	10-11
Health Care	12-18
DHS Staff News	19



KALAMAZOO GAZETTE

Mom enters pleas in son's 'accidental death'

Wednesday, May 28, 2008

Gazette Staff Reports

CENTREVILLE -- Manslaughter charges against the mother of a Sturgis teenage boy who died in April 2007 have been dropped, but she has pleaded guilty to three other charges related to her son's death.

Teresa Lea-Ann Kleine has pleaded guilty to second-degree child abuse, according to a press release issued Tuesday by the St. Joseph County Prosecutor's Office.

The charge is defined as a reckless act that results in serious physical or mental harm. It is a felony carrying a maximum sentence of up to four years in prison.

Kleine also has pleaded guilty to a charge of delivery of marijuana and of maintaining a drug house.

Her son, Daniel Shepherd, 15, was found dead on April 28, 2007, in her home after he and other minors were allowed to smoke marijuana there. Police said Kleine failed to seek medical help for the boy when it was needed.

Daniel died from an overdose of methadone, the press release stated. Although it was prescribed to Kleine, Daniel apparently used it without anyone knowing it.

Kleine apparently thought the symptoms Daniel displayed were related to his marijuana use and knew nothing of his taking methadone, the press release stated.

"I do not think it would be fair to put a mother on trial for the homicide of her child when the evidence indicates she had no reason to know that he was so near his death," Prosecutor Douglas Fisher said in the release. "Her actions and decisions on the day of his death and the night before cannot be condoned. She has accepted full responsibility for those actions and decisions and understands how they caused the accidental death of her son.

"She will be punished according to the law."

©2008 Kalamazoo

© 2008 Michigan Live. All Rights Reserved.

In a child-proofed era, accidents still happen -- and critics point fingers

Posted by [destep](#) May 27, 2008 05:41AM

HOLLAND -- Cal Gillihan thought he did everything right.

The carpenter protected his five young children by building a fence to shield them from fast-moving cars along East 40th Street in Holland. He and his wife made sure household chemicals were out of reach and cabinet doors inaccessible.

But an unlikely source of danger -- a locked second-story window -- harmed Rileigh, his 22-month-old toddler, earlier this month.

Rileigh's 3-year-old brother jimmied the lock when the children went to bed. The curious girl went to the ledge, stuck her head out and plummeted 15 feet, landing on a gravel driveway and fracturing her skull. She survived and is recovering at home.

"I never thought our 3-year-old would open the window. He never showed he could do that," Gillihan said. "You think you have all the protections, but we now know better."

Child-safety experts say dangers lurk everywhere. In an increasingly safety-conscious society, a recent spate of unpredictable accidents has caused exasperation among parents and scathing criticism in Internet chat rooms and on message boards.



Press Photo/T.J. Hamilton Henry Roeters celebrates after climbing to the top of the tire pyramid with his son Henry, 2 at Belmont Elementary playground. Roeters says he tries not to be overprotective of his children.

For example:

- An Ionia mother was skewered by strangers earlier this month after she accidentally backed over her 2-year-old boy, who since has been released from the hospital.
- Last month, a Cascade Township woman's parenting was questioned when her 5-year-old daughter, Hannah Hower, was strangled by the nylon rope of a backyard swing. She died two weeks later.
- And, last week, a 2-year-old from Big Rapids drowned after wandering away from his grandfather at a park. This drew harsh commentary on message boards about why the child wasn't wearing a life jacket when he was near the strong Muskegon River current.

But is it fair for outsiders to pass judgment?

Not to Gillihan, who said he and his wife, Angela, were stung by the vitriol.

"I think there are people who want to try to say we did something wrong," Gillihan said. "But I feel like people don't know all the facts. If they knew what happened, I don't think they would judge us."

Friends of Doug and Erika Hower urged compassion and caring rather than venom and anger.

"It was really degrading," said Lyra May, a friend of the mother's. "They lived their life for their daughter and raised her to be a good person, and to see that talk was unnerving."

The verbal abuse may be a defensive tool aimed at insulating parents so they can believe nothing similar could happen to their children, an expert said.

"It may be serving as a partial escape mechanism," said Eric VanFleet, a professor from Grand Valley State University's College of Health Professions.

Guarding children from trouble has become increasingly prevalent. In fact, buffering has become a cottage industry, with businesses designed to spot dangers in your home.

Parents are trained to be hyper-aware, making certain cords are out of reach, furniture is secured to walls, electrical outlets are covered and vehicles equipped with rearview video cameras. Bike helmets are a must, kneepads a good idea and, now, state law requires kids use booster seats in cars until they are 8 years old.

Many of those safeguards, only the beginning of extensive parental checklists advocated by experts, were largely unheard of as recently as two decades ago.

The gradual cultural shift is an example of parents trying to feel less vulnerable to what Calvin College psychology department chairman R. Scott Stehouwer calls "a bolt out of the blue" accident.

"There's a belief that there's a way to fix everything and, if we take these steps, we're protected," Stehouwer said. "The reality is that stuff happens, and it's a scary thought that we can't control everything."

The warnings are sound advice, but they can wear on parents and encourage impracticality, said Henry Roeters IV, a parent of two children younger than 3.

Roeters, 25, said he may as well have bubble-wrapped his oldest child, Henry V, a 2-year-old. With his daughter, Samantha, 1, Roeters has tried to take off the kid gloves.

"At some point, you have to realize that accidents happen no matter what we do," he said during a walk at Huff Park on Grand Rapids' Northeast Side. "Without some pain and some mistakes, how do you learn?"

Roeters, like Gillihan, takes issue with anyone who directs remarks toward the grieving parents of children involved in accidents.

"They either have never had kids or have forgotten what it's like," Roeters said.

Greg Westfall, also a parent of two, echoes Roeters thoughts. Westfall tries to prevent injury but doesn't go overboard. He says children aren't as fragile as some would lead you to believe.

"It's not like I sit at work and worry about them getting hurt," Westfall said. "You do what you can and hope for the best."

In fact, Stehouwer and VanFleet argue children should be given opportunities to learn through experience. Parents

In a child-proofed era, accidents still happen -- and critics point fingers - Latest News - The Grand Rapid... Page 3 of 3
sometimes can be overly cautious and inadvertently teach children to fear activities, such as baseball and bicycling.

"Certainly, safety is important," VanFleet said. "There's no one recipe and no save-all."

Categories: [Breaking News](#), [Editors' Choice](#), [Top Photos](#)

Comments

Footer

Doctor notices more cases of condition that causes flattened skulls, tilted heads

Posted by [bdegroff](#) May 28, 2008 06:35AM



Press Photo/Emily ZoladzHappy family: One-year-old Ellie Nyenhuis is tickled by her brother Sam, 2, as parents Tom and Lisa hold them the living room of their Cannon Township home.

GRAND RAPIDS -- It wasn't all that noticeable at first. Then, about three months after their daughter, Ellie, was born, Tom Nyenhuis said something about it.

Doesn't Ellie's head tilt to the side? he asked his wife, Lisa.

"I kind of thought he was crazy," Lisa said. "I thought, she's a newborn; they have floppy heads. I'm with her all day long. Why wouldn't I notice it?"

But then a friend said she, too, had noticed Ellie's head always tilted to the right. Lisa called her pediatrician, Dr. Ken Fawcett, who diagnosed torticollis, a shortening of the neck muscles, pulling Ellie's head to the right. Plus she had a related disorder called plagiocephaly, a flattening on the right side of her skull.

The Nyenhuises had never heard of either disorder.



Press Photo/Emily ZoladzAll better now: Ellie Nyenhuis, nearly 1, of Cannon Township, holds the helmet she wore for four months to help correct her case of torticollis, a condition that shortened the muscles on one side of her neck and flattened her head.

Dr. Dayle Maples had.

"I see it very commonly in my clinic," said Maples, a pediatric orthopedic specialist at Helen DeVos Children's Hospital and Mary Free Bed Rehabilitation Hospital.

In fact, she has seen an increasing number of babies with plagiocephaly since 1992 when the American Academy of Pediatrics initiated its "back to sleep" campaign, urging parents to place newborns on their backs to avoid sudden infant death syndrome.

Maples said parents should continue following that advice, but they also should be aware that infants who spend too much time lying in one position can develop the misshapen skull characteristic of plagiocephaly. When awake, babies should be given more "tummy time," she said, allowing the skull to develop the more-typical symmetrical shape.

Plagiocephaly can occur without torticollis, Maples said, but torticollis can cause plagiocephaly.

About one in 300 babies is born with torticollis, and 80-90 percent also develop plagiocephaly. In many cases, the torticollis results from the baby's position and limited space in the womb, Maples said.

Lisa Nyenhuis believes that caused Ellie's torticollis and plagiocephaly.

Ellie sat in a high chair at their Rockford-area home one recent morning, eating pancakes and bananas, offering a soggy handful to a visitor. She's a year old now and shows no sign of either condition.

"I think I actually made it worse by the way I was carrying her," Lisa said, "but I didn't know anything about it."

She usually carried Ellie with her right arm, leaving her left hand free to care for her older child, Sam, now nearly 3 years old.

Last fall, her pediatrician referred Ellie to Mary Free Bed for therapy. Using a laser scan of her skull, technicians there custom designed a plastic helmet for her to wear 23 hours a day, allowing her head to grow into a normal shape.

Twice a week, Lisa Nyenhuis took Ellie to Mary Free Bed for physical and occupational therapy.

Several times a day, she exercised her at home, stretching the muscles on the right side of her neck and strengthening the muscles on the left side.

Left untreated, Ellie's head would have remained tilted to the right, her skull would have developed an asymmetrical appearance, and her jaw would have protruded to the left.

She likely would have developed vision, hearing and spinal problems.

She no longer wears her helmet or goes for physical therapy.

"Everything's fine," Lisa said. "It was curable. It was a matter of sticking with all the exercises. I keep watching for it now."

She decided to speak publicly about it, hoping to alert other parents.

FACT SHEET

On the lookout

Plagiocephaly warning signs:

- Flatness on one side or back of head.
- Irregular, unbalanced head shape
- Uneven cheeks, ears or eyes

Torticollis warning signs:

- Head rotating or tilting to one side
- Low tolerance for lying on tummy
- Poor head control
- Visible arch in trunk of body

SOURCE: Mary Free Bed Rehabilitation Hospital

"It was amazing to me how common it was," she said.

E-mail Pat Shellenbarger: pshellenbarger@grpress.com

Categories:

Comments

Footer



Wednesday, May 28, 2008

\$180,000 grant to help homeless Detroit children

The Detroit News

DETROIT -- A Detroit nonprofit has received a \$180,000 grant to provide day care for homeless children.

The Coalition on Temporary Shelter (COTS) Tuesday announced it had received the money from the Skillman Foundation, which is dedicated to developing good schools and neighborhoods for children.

The Skillman grant will provide funding for Bright Beginnings, a new COTS program that provides developmentally appropriate child care services to 15 homeless infants and toddlers. The program also provides parenting skill development classes, parent coaching and other support.

"We greatly value the support of the Skillman Foundation," Lynn Wilhelm, COTS Chief Development Officer, said in a statement. "Without their continuing support, COTS would find it very difficult to provide the level of care that we give to Detroit's homeless."

Find this article at:

<http://www.detnews.com/apps/pbcs.dll/article?AID=/20080528/METRO01/805280306>

☐ Check the box to include the list of links referenced in the article.

© Copyright 2008 The Detroit News. All rights reserved.



KALAMAZOO GAZETTE

Seniors are prime targets for fraud

Tuesday, May 27, 2008

Senior citizens are not only living longer and healthier lives, they are part of a growing segment of the population that is increasingly susceptible to fraud.

For example, more than half of fraudulent telemarketing calls are directed at the elderly. And the aging of America has made the problem worse.

Today, it has been estimated that some 25 million Americans, mostly seniors, have been victims of a myriad of wrongdoing. The types of scams are widely varied, and the scope is limited only by the creativity of the callous people who prey upon some of the most vulnerable among us.

Fraud against seniors is wide-ranging -- telemarketing, investment schemes, home repair, identity theft, insurance, phony charitable-giving requests, to name just a few.

Fortunately, this disgraceful national problem is getting more public attention.

At Kalamazoo's Third Reformed Church earlier this month, Michigan Attorney General Mike Cox addressed the sixth annual "Safe, Sound and Secure" conference for seniors. Cox said his office is "stepping up its game" in an effort to protect senior citizens from fraud.

The conference was sponsored by the Kalamazoo County Consortium, Kalamazoo County Sheriff's Department, Senior Services, Area Agency on Aging IIIA, Guardian Finance and Advocacy Services and Life EMS Ambulance.

We applaud the effort, and we trust that it will amount to more than just political rhetoric.

Locally, the problem mirrors that of the national experience. But there are strong efforts being made to combat and reduce senior fraud. Colleen Simpson is regional coordinator for the Michigan Medicare Medicaid Assistance. Her office is here at

Senior Services.

"We're seeing a lot of calls that come filtering through our office," Simpson said, noting that, with seniors among those Americans who are now receiving federal income tax rebates, they are especially susceptible to being taken in.

Simpson has a cadre of 15 volunteers -- half of them retired -- who go out into the community to inform and warn senior citizens about potential fraud, and how to avoid becoming victims. Their efforts, along with support from law enforcement agencies and civic organizations, are certainly helpful.

But the best defense is widespread awareness among seniors themselves.

Here are a few tips:

v If a pitch seems too good to be true, it probably is. Demand to get something in writing before making any commitment. And get a second opinion before committing yourself to a course of action.

v Never give personal information -- address, credit card or Social Security numbers -- over the phone or Internet, unless you have initiated the contact. Ethical business callers will not ask for such information. Legitimate telemarketers will respect a cautious response.

v Pay attention to fraud warnings in newspapers, on television, the Internet and other media.

v Eliminate paper trails for ``dumpster divers." These brazen crooks rummage through waste receptacles in search of private information such as canceled checks, bank statements and other confidential information. Shred or tear up such correspondence before disposing of it.

The consequences of such fraudulent activity can be devastating in the lives of senior citizens and their families.

Being alert to these scams and using common sense to avoid them can go a long way in preventing such catastrophic events.

©2008 Kalamazoo

© 2008 Michigan Live. All Rights Reserved.

Parents fear deportation will end girl's medical refuge in West Michigan

Posted by [destep](#) May 28, 2008 05:46AM



Press Photo/Rex Larsen Lil Mejia came to West Michigan from the Dominican Republic with her parents, Giselle and Jaime in 2005, seeking medical treatment they believe saved her life. Medical assistant Diana Holtzlander is in the background at Grand Rapids Pediatrics.

GRAND RAPIDS -- Three years ago, their daughter's life on the line, Giselle and Jaime Mejia gambled everything on the U.S. medical system.

Now, they fear U.S. immigration law will doom the chance medicine gave 9-year-old Lil.

"I don't have words to say how much my daughter means to me," Giselle Mejia said. "We gave up everything for her."

Lil Mejia was born in 1998 in the Dominican Republic after a difficult pregnancy. Shortly after birth, she stopped breathing. Seizures and pneumonia followed.

Six years and many complications later, Giselle, 33, and her husband, Jaime, 36, obtained temporary visas and brought Lil to West Michigan to receive a life-saving hormone.

The treatment stabilized her condition: a rare combination of severe asthma, allergies, chronic lung disease and hormone deficiencies.

Now, their visas have expired, and deportation proceedings could force the Mejia family to leave the country.

They were relieved when a hearing set for this month in Detroit was postponed, giving them more time to build the case they are desperate to win.

"It's hard. It's very hard. We trust in the Lord, that he has a way for us, a good way," Jaime Mejia said.

Grand Rapids pediatrician Monica Randles has treated Lil since a few months after her arrival in March 2005. Randles said the Mejias' fears are justified.

"This is a humanitarian issue. Is this kid going to live? I honestly try not think about this kid being deported," Randles said. "It just gets me enraged."

Medical circumstances aside, the law may work against the family.

According to Susan Im, a Grand Rapids immigration lawyer who represents the family, they face a "very difficult

The Mejias came here on a six-month visa, not anticipating their stay would stretch into years. They came, Giselle Mejia explained, because they had run out of options.

Lil weighed about 5 pounds at birth but was slow to grow. She weighed less than 15 pounds on her first birthday.

The Dominican Republic's hot weather caused dangerous imbalances in her electrolytes. She had seizures and nearly died from pneumonia. Doctors mistakenly concluded she had cystic fibrosis, a condition that leads to lung failure and death.

A blood test found she lacked a growth hormone, which required a replacement medication so expensive it was beyond the family's means, even though Jaime Mejia earned a good salary as director of information technology for the Dominican Republic's Supreme Court.

"The doctors said we don't know what else we can do for her," Giselle Mejia said.

With help from one of Jaime's sisters, Sonja Stapert, of Grand Rapids, the parents reached doctors at Helen DeVos Children's Hospital. They said they would treat Lil.

Further tests in Grand Rapids concluded she did not have cystic fibrosis but suffered from severe asthma and a chronic lung condition that left her susceptible to infection. She lacked a growth hormone produced by the pituitary gland, and there was an imbalance in her cortisol levels, another hormone that regulates electrolytes. For all this, she takes about a dozen medications.

Lil's care became tenuous when the family's second six-month visa expired in March 2006.

Im is pinning her hopes on a couple of long-shot strategies.

She is pressing for relief from Immigration and Customs Enforcement, which could issue an administrative ruling that would allow the Mejias to remain in the country on humanitarian grounds. Such rulings are rare.

She also is in contact with the office of U.S. Sen. Carl Levin, D-Detroit. Levin could introduce a bill that would grant the family permanent resident status.

"It is a remedy of last resort," Im said.

Tara Andringa, spokeswoman for Levin, was noncommittal about any help his office might offer.

"Our staff has been working with the family and their attorneys to determine what administrative and legal options are available to them, to assist them as appropriate," she said.

In the meantime, the family relies on its faith and support of parishioners at Reformed Baptist Church of Holland.

Since learning of their plight, church members have donated clothing, food and money to support the Standale family, which also includes two other children, Ambar, 7, and James, 10 months.

The family is paying back what medical bills it can through money donated by the church. Doctors also have donated some services. Emergency hospitalizations are paid through Medicaid.

"The church has kind of rallied around their cause," said church member Bob Niemiec, of Zeeland.

Niemiec has been impressed by the Mejias' determination to give back to the West Michigan community, however they can.

He notes Jaime Mejia has logged dozens of hours of donated information technology work for the American Red Cross of Greater Grand Rapids. He was named one of the organization's volunteers of the year in 2007.

"He has saved us thousands and thousands of dollars," said Red Cross CEO Lisa Marks.

Their immigration status prohibits any Mejias family member from taking a job.

"This isn't really about immigration. This is about a child's life. There are times for exceptions, and I think this is one of them," Marks said.

Giselle Mejia tries not to consider what may happen should they lose this fight.

On top of other ailments, Lil has severe allergies to cockroaches and dust mites, both of which thrive in the heat and humidity of the Dominican Republic.

The unreliability of the power grid there means air conditioning can go out without warning, which can send Lil into a medical crisis.

"It is really scary," Giselle Mejia said. "We never thought she would get to 10 years old and, now, she will be 10 in August.

"We don't want to give up."

Categories: [Breaking News](#), [Top Stories](#)

Comments

leonash says...

I find it inconceivable that Levin's staff is "noncommittal" and he, personally is not involved. Is it that he is too busy with matters more important than the life of a child ?

The senator has shown himself unworthy of his position.

Posted on 05/28/08 at 7:31AM

leonash says...

I find it inconceivable that Levin's staff is "noncommittal" and he himself is not involved. Can it be that he's too busy with matters more important than the life of a child?

I believe Levin has shown himself unworthy of his position.

Posted on 05/28/08 at 7:34AM

rollnggrnade says...

This is the face of the consequences of the misguided crusade against immigration. It's sad to see so many US residents wrapped up in hating people who are only doing the exact same thing they would do if the roles were reversed: trying to do what's best for their children.

Posted on 05/28/08 at 10:34AM

Footer



Wednesday, May 28, 2008

Opinion

Michigan needs comprehensive health reform

Daniel J. Loepp

The Robert Wood Johnson Foundation late last month issued a report declaring that the number of businesses offering health insurance coverage in Michigan declined by 11 percent between 2001 and 2005. This erosion of employer coverage affected more than 370,000 workers, according to the study, and thousands more workers have lost their health coverage after layoffs and buyouts.

Michigan business and political leaders have said solving our health care problems is a top priority. A viable approach would correctly focus on the cost of health care services as the engine that drives health insurance premiums upward. It would endorse efforts that make our population healthier, empower consumers with information and improve the quality and efficiency of health care services. All are essential to solving our cost problem.

Just as essential is thorough reform of the state's individual health insurance market to protect the growing number of individuals shopping for their own health coverage.

A Senate-passed proposal stops short of calling for comprehensive reform. Michigan remains one of the few states that have not reformed the individual health insurance market. This spring, as a House-Senate work group tries to fashion a health insurance reform package in Lansing, comprehensive reform with a long-term focus should be the goal.

The work group's focus should be the long-term ability of consumers to afford their individual coverage. This comprehensive view is best achieved by following successful reforms enacted elsewhere -- like the 35 states that have restructured their markets to require all insurers to share in the cost of providing guaranteed coverage for people with very expensive medical conditions.

It should include reforms that have worked in Michigan -- such as the rate band system recently put into place for our small employer market. This has worked to stabilize premium increases for small employers over the last few years.

As the individual market transforms from a place for people to find short-term coverage between jobs into a permanent market for many consumers, reforms focused on the long-term will best protect the people of Michigan.

Comprehensive reform should ensure that all insurers are regulated under consistent standards, provide for a fair and level playing field, ensure competition among carriers and hold all insurance companies accountable if they overcharge their subscribers.

Finally, comprehensive reform should ensure that a safety net exists in Michigan, so our residents are able to obtain health coverage. This safety net should be financially viable over the long-term, as the number of

people in the market continues to dramatically expand.

Blue Cross Blue Shield of Michigan, which has offered to provide the lion's share of the financing for safety net coverage after reform, argues that some of the cost should be shared by all insurers who reject people with medical conditions and send them to the last-resort carrier.

As the urgency for change grows stronger, it is important to seize opportunities for comprehensive reform. Especially when it comes to health care, we should focus on comprehensive, long-term measures that achieve meaningful change -- not half-measures that leave the fundamental problems waiting to be fixed in the future.

Daniel J. Loepp is president and chief executive of Blue Cross Blue Shield of Michigan. Fax comments to (313) 222-6417 or e-mail them to letters@detnews.com.

Find this article at:

<http://www.detnews.com/apps/pbcs.dll/article?AID=/20080528/OPINION01/805280314>

☐ Check the box to include the list of links referenced in the article.

© Copyright 2008 The Detroit News. All rights reserved.



Petition backers rally for health care reform

Ballot drive needs at least 250,000 more signatures

By Catherine Kavanaugh
Journal Register News Service

Chenelle Grant will need her third operation for kidney stones in 18 months and she has yet to pay off the credits cards she used for her previous hospital stays.

The Royal Oak resident is a full-time student studying nursing at Wayne State University and Oakland Community College. No job means no health insurance and at age 26, Grant is no longer eligible for coverage under her mother's plan.

Her last two hospital stays cost about \$7,500 each and Grant is worried about putting the next bill on plastic, too.

"This is killing my credit and it's destroying me," Grant said Tuesday. "And, even when I did work, the insurance didn't cover my medicine and I got turned down for treatments. They just let me suffer."

Grant spoke at a rally for volunteers about to step up their effort to collect signatures for the Healthcare for Michigan ballot initiative. Supporters want to amend Michigan's constitution to force state leaders to come up with a plan that provides health insurance to those without coverage, ensures people who have health insurance don't lose it, and protects individuals and businesses from rising health care costs.

Petition backers need 370,000 signatures by July 1, but set a goal of 475,000 in case any are deemed invalid. They have 120,000 signatures to date, according to Frank Houston, a Royal Oak resident who is deputy director of Healthcare for Michigan.

"It's within reach," Houston said of the effort to get the initiative on the Nov. 4 ballot.

Volunteers went door-to-door in Royal Oak on Tuesday and will begin street canvassing at post offices and major events around metro Detroit in the coming weeks. Many volunteers are members of the Service Employees International Union, which is the state's largest health care union. They met outside Meijer on Tuesday, when the union's Road to American Healthcare bus made a stop. The bus is traveling the country to highlight the stories of the uninsured.

Dr. Mumtaz George, who works next door to Meijer at Royal Oak Medical Center, has heard many accounts firsthand. He walked over to sign a petition.

<http://www.macombdaily.com/cgi-bin/printme.pl>

"I just had an uninsured patient who went to the emergency room for an earache and got a bill for \$850," George said. "We have to push until we find an answer. I know this might be difficult to do in Michigan, but where there is a will there is a way."

Paul Burns of Auburn Hills said he tried to get health coverage on his own after he joined the ranks of Michigan's estimated 1.1 million uninsured residents. He lost his job six months ago and when he tried to get buy insurance for his wife and himself he was told it would cost \$550 a month.

"That's cost-prohibitive," Burns said. "My wife and I are one health emergency from financial ruin. It's about time our elected leaders do something. I applaud this grass-roots movement."

Petition backers aren't putting a specific reform package on the ballot. The goal of the petition drive is for voters to order the state Legislature to act. Supporters contend the key to reform is to use the funding that is available more wisely.

Between \$57 billion and \$63 billion a year is spent on health care in Michigan, according to the Governor's Council of Economic Advisers. That amounts to about \$6,000 a person, which Healthcare for Michigan advocates contend should be enough to cover everyone's preventative, primary, acute and chronic health care needs.

John Freeman, chair of the Healthcare for Michigan Ballot Committee, said 80 percent of the state's uninsured residents are working for businesses that scaled back or dropped coverage to cut costs.

"It's not as if they aren't doing what they are supposed to," Freeman said. "They are working hard and playing by the rules. They deserve the health care they need."

To get a petition or more information, go to www.healthcareformichigan.org.

Click here to return to story:

http://www.macombdaily.com/stories/052808/loc_local01.shtml



May 25, 2008

Yager named new human services director

ST. JOHNS — Michigan Department of Human Services (DHS) director Ismael Ahmed has announced the appointment of Steven J. Yager of Woodland as director of the Clinton/Gratiot County DHS effective May 5.

"Steve has demonstrated significant administrative skills and has extensive child welfare experience in both field offices and central administration," Ahmed said. "I am confident that, as director of the dual Clinton/Gratiot offices, he will continue to provide quality leadership."

As Clinton/Gratiot DHS director, Yager will be responsible for the administration of federal cash assistance programs, as well as child and adult services including protective services, adoption services and foster care services.

Yager has been a DHS employee for 21 years and holds a bachelor of arts degree in psychology from Cedarville College in Cedarville, Ohio. He is married and the father of three children.

For more information go to www.michigan.gov/dhs

— *From Michigan Department of Human Services*
